ADDIT FEE

ADDIT FEE

P10/SB 06 (08.06)
Approved for use through 10/31/2002, OMB 0651-00/2

(a) Department Office: U.S. DEPARTMENT OF COMMERC!

It iden the Paperwork Pediction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD

CLAIMS AS HIEFD PAPE. 111 SMALL PRINTS es olumn br RATI 93.13 HEMBER EXTRA SUMBER THEFD FOR ٠ ـ OR BASIC FEE. (37 CLR 1 1664)) xs/9 617 $\min > 30$ TOTAL CLAIMS (37 CFR 1.16(c)) -1 113 INDEPENDENT CLAIMS يندون ا minin 3 COURTIGO . OR MULTIPLE DEPENDENT CLAIM PRESENT ATTERNION TOTAL Θ If the difference is column 1 is less than zero, enter 70° in column 2 OTHER THAN CLAIMS AS AMENDED : PART II SMALL ENTITY Oil SMALL ENTITY : (Columb 2) (Column 1) ADDI-ADDI-HIGHEST CLAIMS TIONAL PRESENT RATE TIONAL RATE NUMBER REMAINING FEE PREVIOUSLY EXTRA FEE **AFTER** AMENDMENT PAIDFOR AMENDMENT OR Total Minus OR (37 CFR 1.16(c)) Independent Minus OR (37 CFR 1.16(h)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL OR TOTAL ADDIT, FEE ADDIT, FEU r . namn 3. --(Column 2) (Column 1) ADDI-ADDI-HIGHEST CLAIMS TIONAL RATE TIONAL. PRESENT RATE NUMBER REMAINING FEE FEE = PREVIOUSLY EXTRA AMENDMENT **AFTER** PAID FOR MEND: AMENDMENT 12 OR. Total Minus OR (37 CFR 1.16(c)) -= OR Independent Minus (37 CFR 1.16(b)) -of CIR (164) **OR** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TOTAL TOTAL ÖŔ ADDIT, FEE ADDIT, FEE o Celumn 3 c (Column 2) (Column 1) ADDE ADDI-HIGHEST CLAIMS TIONAL RATE PRESENT RATE TIONAL NUMBER REMAINING re: FEË PREVIOUSLY EXTRA :--AMENDMENT AFTER PAID FORidd AMENDMENT ΘR Total Minus OR Ξ Independent :OR Minus (37 CFR 1.16(b)) 150 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ·... OR TOTAL

* If the entry in column 1 is less than the entry in column 2, write " θ " in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" *** If the "Highest Number Previously Pad For" IN THIS SPACE is less than 3, entry 3

The "Highest Number Previously Paid For" (Total or Independent) is the highest number total in the appropriate box in column !

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time wit, vary depending upon the needs of the individual case, Any comments on the amount of time von are required to complete this form should be sent to the Chief Information Officer, U.S. Panent and Hademarian Office, Washington, DC 20231 DO SOT SUSDITERS OF COMPLETED FORMS TO THE ADDRESS. SUSDITED. Assistant Commissionly for Panents. Washington, DC 20231.